



INSTRUCTIONS FOR COMPLETING THE 2018 MONTANA TSD FACILITY ANNUAL REPORT FORM

Please Read These Instructions Before Completing the Report Form

Who Must File

Under the Administrative Rules of Montana (ARM), owners or operators of permitted hazardous waste management facilities or facilities under a corrective action order must submit an annual report to the Department of Environmental Quality (DEQ) by March 1 of each year. Hazardous waste management activities related to the permit or corrective action order and conducted during the previous calendar year must be reported.

Citations from Title 40, Code of Federal Regulations (CFR) referenced in these instructions are incorporated by reference in ARM, Title 17, Chapter 53.

What to File

Non-regulated Status and Non-generator

If your facility **did not** generate, treat, store (for greater than accumulation time limits pursuant to 40 CFR 262.34), or dispose of regulated quantities of hazardous waste at **any** time during calendar year 2018, complete and submit:

1. Part One (General Information) to notify DEQ of your non-regulated status.

Non-regulated Status and Generator

If your facility generated and shipped hazardous waste off-site, but **did not** treat, store (for greater than accumulation time limits pursuant to 40 CFR 262.34), or dispose of any portion of that waste **on-site** in calendar year 2018, complete and submit:

1. Part One (General Information) to indicate your non-regulated status, and
2. The appropriate Generator Annual Hazardous Waste Report for your facility's generator status.

Regulated Status and Generator

If your facility generated and shipped hazardous waste off-site **and also** treated, stored (for greater than accumulation time limits pursuant to 40 CFR 262.34), or disposed of hazardous waste **on-site**, complete and submit:

1. Parts One (General Information), Two (Waste Identification and Final Management) and Three (Waste in Storage), and
2. The appropriate Generator Annual Hazardous Waste Report for your facility's generator status.

When and Where to File

The TSD Annual Facility Report must be submitted to the DEQ, Waste and Underground Tank Management Bureau, Hazardous Waste Program no later than March 1, 2019. You may be subject to enforcement action if your report is not filed by that date.

The report must be postmarked no later than:

March 1, 2019

What to Report

- All regulated quantities of hazardous waste treated, placed in storage, or disposed of, between January 1, 2018 and December 31, 2018.
- Any hazardous waste your facility received from other generators.
- Last management method of hazardous waste generated at your facility between January 1, 2018 and December 31, 2018.
- The total quantity of waste in storage at your facility as of December 31, 2018, reported by storage method.

Report only wastes regulated as either *characteristic* or *listed* hazardous wastes. Characteristic and listed wastes are identified in Subparts C and D of 40 CFR Part 261. Subparts C and D can be found at the following web sites:

- U.S. EPA Laws & Regulations, Chapter I - Environmental Protection Agency, Subchapter I – Solid Waste, Parts 260-265:
https://www.ecfr.gov/cgi-bin/text-idx?SID=7da391442b23c5b648c03b881aec11da&mc=true&pl=/ecfrbrowse/Title40/40cfrv28_02.tpl#0
- GPO Access Site - *Code of Federal Regulations: Retrieve by CFR Citation*:
<https://www.gpo.gov/fdsys/search/submitcitation.action?publication=CFR>

Do not report wastes that are not regulated as hazardous under the Montana Hazardous Waste regulations, even if manifested (for example: PCBs, asbestos).

If any or all of the hazardous waste handled by your facility was delisted at some time during calendar year 2018, you must still report those wastes for the portion of the year they were regulated. Note these waste(s) and the corresponding line number in the Comments Section of Part Two and Three.



PART ONE – GENERAL INFORMATION

NOTE: Make any corrections or additions in the shaded area of the form.

I. REGULATED STATUS

If your Facility DID treat, store or dispose

If your facility ***DID*** treat, store or dispose of regulated quantities of hazardous waste at any time during 2018:

1. Check the box marked YES in Section I, and
2. Complete Parts One through Three and return form to DEQ.

If your Facility DID NOT treat, store or dispose

If the facility ***DID NOT*** treat, store, or dispose of regulated quantities of hazardous waste at any time during 2018:

1. Check the box marked NO in Section I,
2. Complete only Part One and return form to DEQ.

II. FACILITY EPA ID NUMBER AND DEQ PROJECT MANAGER

Verify your facility's 12-character EPA identification number.

If you need assistance, the following table shows contact information for your DEQ Project Manager.

Initials	Name	Contact Info
RAH =	Becky Holmes	(406) 444-2876 rholmes@mt.gov
DAK =	Denise Kirkpatrick	(406) 444-3983 dkirkpatrick@mt.gov
AMK =	Ann Kron	(406) 444-5824 akron@mt.gov

III. FACILITY NAME

Verify the name of your facility.

IV. FACILITY LOCATION ADDRESS

Verify the physical location of your facility. ***Do not use a Post Office Box or mailing address.***

V. CONTACT INFORMATION

Verify the name, title, telephone number, extension, mailing address, fax number and email address of the person who may be contacted regarding information contained in this report.

VI. ALTERNATE CONTACT

Verify the name, title, telephone number, extension, and email address of an alternate person who may be contacted if the Contact listed above is not available.

VII. COST ESTIMATES

1. Enter the most recent cost estimate for closure and post-closure care for regulated hazardous waste management unit(s), if applicable.
2. Enter the most recent cost estimate for facility wide corrective action.

VIII. CERTIFICATION

1. Type or print the name and title of the owner or operator of your facility or an authorized representative (e.g. the plant manager, superintendent or person of equivalent responsibility) and date signed.
2. Signature:
 - a. Electronic Submittal: insert an electronic signature or type the name.
 - b. Hard Copy by Mail or Delivery: print and sign the report.

Reminders

- Enter information or corrections in the shaded areas of the form
- Make copies of Parts Two and Three before entering information on the forms



PART TWO - WASTE IDENTIFICATION AND FINAL MANAGEMENT

You must report hazardous waste generated at your facility, and/or received from off-site generators, that was treated, stored (for greater than accumulation time limits per 40 CFR 262.34), or disposed of at your facility during calendar year 2018. Page 9 is an example of a completed Waste Identification and Final Management form.

Use separate pages for reporting wastes that were generated at your facility and wastes your facility received from off-site generators.

For example:

1. Your facility generated 70 different wastes during the calendar year 2018. These wastes were stored and/or treated at your facility. Report these wastes on Part Two forms and check the box in Section IX (Generated On-Site) for each page that lists waste generated at your facility.
2. Your facility received 12 different wastes from an off-site generator during calendar year 2018. These wastes were then stored at your facility until shipment to a permitted hazardous waste disposal facility. Report these wastes on Part Two forms, entering the off-site generator name and EPA identification (ID) number in Sections X through XII for each page that lists wastes received from an off-site generator.

IX. GENERATED ON-SITE

If wastes reported on this page were generated and treated, stored, or disposed of at your facility, check the box marked **GENERATED ON-SITE** and enter "NA" in Sections X, XI and XII.

DO NOT check the GENERATED ON-SITE box if you are reporting wastes received from off-site generators.

X. OFF-SITE GENERATOR EPA ID NUMBER

Enter the EPA ID number of the off-site generator of the waste received by your facility during calendar year 2018 and described in Section XIII.

If the waste was generated at your facility, enter "NA."

XI. OFF-SITE GENERATOR NAME

Enter the name of the generator corresponding to the EPA identification (ID) number in Section X.

If the waste was generated at your facility, enter "NA."

XII. OFF-SITE GENERATOR ADDRESS

Enter the mailing address of the generator with the EPA ID number listed in Section X.

If the waste was generated at your facility, enter "NA".

XIII. WASTE IDENTIFICATION AND MANAGEMENT

List each waste type or waste mixture on a separate line. All wastes, including those wastes in storage on December 31, 2018, must be reported.

In the **Line #** column, enter a consecutive number, starting with 1, for each waste or waste mixture. Continue numbering on subsequent Part Two pages.

A. Description of Waste

Listed hazardous wastes: enter the waste name from 40 CFR Part 261, Subpart D, abbreviated if necessary. For mixtures of listed wastes, use words that best describe the waste.

Characteristic hazardous wastes: include the following information:

- the description from the list of characteristics in 40 CFR Part 261, Subpart C which best describes the waste;
- the specific manufacturing or other process generating the waste; and
- the chemical or generic chemical name of the waste, if known.

B. EPA Hazardous Waste Codes

Listed hazardous wastes: enter the four-character EPA Hazardous Waste Number from 40 CFR Part 261, Subpart D.

Characteristic hazardous wastes: enter the four-character EPA Hazardous Waste Number from 40 CFR Part 261, Subpart C.

Mixtures of more than one listed or characteristic waste: enter all relevant EPA Hazardous Waste Codes. Four spaces are provided on each line. Continue to the next line(s) if more spaces are needed (as shown on Lines 6 and 7 of the example form on Page 9).

C. Last or Final Management Method Code

Enter the final Management Method Code which represents the waste's last or final disposition at the end of the reporting year. Last or Final Management Method Codes are listed in Table 1.

When wastes were managed in multiple stages, report the final management method used to treat or dispose of the hazardous waste.

Enter the appropriate on-site storage code from Table 1 when the waste is in storage at your facility on December 31, 2018.

For example:

1. A waste placed in storage at the beginning of the calendar year and then applied to a land treatment unit at your facility mid-year must be reported with the Management Method Code H131.



2. A waste placed in storage and then shipped to an off-site facility for metals recovery must be reported as Management Method Code H010.

3. A drum containing waste solvent in storage on December 31, 2018 must be reported as On-site Storage Code S01.

D. Last or Final Management Location

Check the box which indicates the location of final management of the waste.

E. Amount of Waste

Enter the quantity of each waste or waste mixture.

F. Unit of Measure

Enter the unit of measure code for the quantity of waste. Use units of measure and corresponding codes from Table 2.

Provide the density (rounded off to the nearest tenth) if gallons or liters or cubic yards are used as the unit of measure.

Check the correct box for density measurement (either pounds per gallon or specific gravity).

XIV. COMMENTS

Use the Comments to explain or clarify any entry. Please cross-reference to the appropriate Section and Line number.

Reminder

- Enter the page number of each sheet and the total number of pages in the upper right-hand corner of each page.



PART THREE – TOTAL WASTE IN STORAGE ON DECEMBER 31, 2018

You must report all hazardous waste that is in storage at your facility on December 31, 2018. This includes:

- The amount of waste in storage generated or received during the current reporting year, and
- The amount of waste in storage generated in previous reporting years.

Page 10 is an example of a completed Waste in Storage form.

XV. WASTE IN STORAGE AT YEAR-END

If your facility had waste in storage on December 31, 2018, check the YES box and complete Section XVI,

Check the NO box, if no waste was in storage on December 31, 2018. Do not fill out Section XVI.

XVI. WASTE IN STORAGE

Each waste or waste mixture in storage on December 31, 2018 must be reported on a separate line.

In the **Line #** column, enter a consecutive number starting with 1 for each waste or waste mixture. Continue numbering on subsequent Part Three pages.

A. Description of Waste

Listed hazardous wastes: enter the waste name from 40 CFR Part 261, Subpart D, abbreviated if necessary. For mixtures of listed wastes, use words you believe best describe the waste.

Characteristic hazardous wastes: include the following:

- The description from the list of characteristics in 40 CFR Part 261, Subpart C which best describes the waste;
- The specific manufacturing or other process generating the waste; and
- The chemical or generic chemical name of the waste, if known.

B. EPA Hazardous Waste Codes

Listed wastes: enter the four-character EPA Hazardous Waste Number from 40 CFR Part 261, Subpart D.

Characteristic wastes: enter the four-character EPA Hazardous Waste Number from 40 CFR Part 261, Subpart C.

Mixtures of more than one listed or characteristic waste: enter all the relevant EPA Hazardous Waste Codes. Four spaces are provided for this on each line. Continue to the next line(s) if more spaces are needed.

C. On-Site Storage Process Code

Enter the appropriate on-site storage code from Table 1.

D. Amount of Waste

Enter the quantity of each waste or waste mixture.

E. Unit of Measure

Enter the unit of measure code for the quantity of waste. Use units of measure and corresponding codes from Table 2. You do not need to include density information.

F. Year Waste Placed in Storage

Enter the year the waste was placed in storage at your facility.

XVII. COMMENTS

Use the Comments to explain or clarify any entry. Include a cross-reference to the appropriate Section and Line number.

Reminders

- Sign the Certification Statement (Section VIII)
- Report forms must be submitted to DEQ and postmarked no later than **MARCH 1, 2019**



PLEASE MAIL OR EMAIL COMPLETED FORMS TO:

Waste & Underground Tank Management Bureau
Hazardous Waste Program
P.O. Box 200901 (US Postal Service)
1520 East Sixth Ave. (FedEx or United Parcel Services)
Helena MT 59620-0901
Email: [DEQ Hazardous Waste Program](mailto:deqhazwaste@mt.gov) (deqhazwaste@mt.gov)

For additional information, contact the Hazardous Waste Program:

(406) 444-5300

<http://deq.mt.gov/Land/hazwaste>

Electronic reporting forms in Word and Adobe Acrobat format are available on the DEQ Hazardous Waste website
<http://deq.mt.gov/Land/HazWaste/hazformsreport>



TABLE 1 LAST OR FINAL MANAGEMENT METHOD CODES	
CODE	MANAGEMENT METHOD
Reclamation and Recovery	
H010	Metals recovery including retorting, smelting, chemical, etc.
H020	Solvents recovery (distillation, extraction, etc.)
H039	Other recovery or reclamation for reuse including acid regeneration, organics recovery, etc. (specify in comments)
H050	Energy recovery at this site – used as fuel (includes on-site fuel blending before energy recovery; report only this code)
H061	Fuel blending prior to energy recovery at another site (waste generated either on-site or received from
Destruction or Treatment Prior to Disposal at Another Site	
H040	Incineration – thermal destruction other than use as a fuel (includes any preparation prior to burning)
H070	Chemical treatment (reduction/destruction/oxidation/precipitation); do not include immediate treatment in an exempted wastewater treatment unit with discharge to a NPDES-POTW (unless required by state)
H081	Biological treatment; do not include immediate treatment in an exempted wastewater treatment unit with discharge to a NPDES-POTW (unless required by state)
H100	Physical treatment only (adsorption/absorption/separation/stripping/dewatering), do not include immediate treatment in an exempted wastewater treatment unit with discharge to a NPDES-POTW (unless required by state)
H110	Stabilization prior to land disposal at another site (encapsulation/stabilization/fixation)
H120	Combination of chemical, biological, and/or physical treatment; do not include immediate treatment in an exempted wastewater treatment unit with discharge to a NPDES-POTW (unless required by state)
H121	Neutralization only (no other treatment)
H122	Evaporation (as the major component of treatment; not reportable as H070, H081, H100, or H120)
H123	Settling or clarification (as the major component of treatment; not reportable as H071 – H083)
H129	Other treatment that does not include onsite disposal (specify in comments)
Disposal	
H130	Surface Impoundment that will be closed as a landfill (with prior treatment and/or stabilization meeting LDR treatment standard)
H131	Land treatment or application (to include any prior treatment and/or stabilization)
H132	Landfill or surface impoundment that will be closed as landfill (to include any prior treatment and/or stabilization)
H134	Deepwell or underground injection (with or without treatment; this waste was counted as hazardous waste)
H135	Discharge to sewer/POTW or NPDES (with prior storage – with or without treatment)
Transfer Off Site	
H141	The site receiving this waste stored/bulked and transferred the waste with no treatment or recovery (H010 – H129), or disposal (H131 – H135) at the receiving site. Do not use for on-site final management code
CODE	ON-SITE STORAGE METHOD - use when waste is in storage on December 31 st of reporting year
S01	Container (Barrel, Drum, etc.)
S02	Tank
S03	Waste Pile
S04	Surface Impoundment
S05	Drip Pad
S06	Containment Building-Storage
S99	Other Storage (specify in Comments)



TABLE 2 UNIT OF MEASURE CODES	
CODE	UNIT OF MEASURE
1	Pounds
2	Short Tons (2,000 pounds)
3	Kilograms
4	Metric tons (1,000 kilograms)
5	Gallons
6	Liters
7	Cubic yards
Weight and Volume Conversions	
1 kilogram (kg) = 2.2046 pounds (lb) 1 short ton = 2.000 lb 1 metric ton = 1,000 kg 1 metric ton = 1.1023 short tons 1 cubic meter (m) = 1.3079 cubic yards 1 cubic yard (yd) = 27 cubic feet (ft) 1 liter (l) = .02642 gallons (gal)	



EXAMPLE

(Make copies of this sheet for additional pages)

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PART TWO WASTE IDENTIFICATION AND FINAL MANAGEMENT							
IX.	<input type="checkbox"/> Generated On-Site Check if waste was generated <u>and</u> treated, stored (for greater than accumulation time limits pursuant to 40 CFR 262.34), or disposed at your facility, then enter "NA" in Sections X, XI, and XII.	XI.	Off-Site Generator Name <small>(Specify generator from whom all wastes listed on this page were received)</small>				
		XII.	Off-Site Generator Address <small>(Street or P.O. Box)</small>				
X.	Off-Site Generator EPA ID Number <small>(Enter Generator 12-digit EPA ID No.)</small>		<div style="display: flex; justify-content: space-between;"> <small>(City or Town)</small> <small>(State)</small> <small>(Zip Code)</small> </div>				
XIII.	A	B		C	D	E	F
Line #	Description of Waste	EPA Hazardous Waste Codes		Last or Final Management Method	Last or Final Management Location	Amount of Waste	Unit of Measure Density
1	Warfarin and warfarin salts	P001		H040	<input type="checkbox"/> On-site <input checked="" type="checkbox"/> Off-site	0.5	2 <input type="checkbox"/> lbs/gal <input type="checkbox"/> sg
2	Petroleum refinery primary oil/water/solids separation sludge	F037		H131	<input checked="" type="checkbox"/> On-site <input type="checkbox"/> Off-site	3679	2 <input type="checkbox"/> lbs/gal <input type="checkbox"/> sg
3	Corrosive cyclic amino ether	D001		H040	<input type="checkbox"/> On-site <input checked="" type="checkbox"/> Off-site	300	5 8.4 <input checked="" type="checkbox"/> lbs/gal <input type="checkbox"/> sg
4	API Separator sludge from the petroleum refining industry	K051		H131	<input checked="" type="checkbox"/> On-site <input type="checkbox"/> Off-site	840	2 <input type="checkbox"/> lbs/gal <input type="checkbox"/> sg
5	Chlorinated distillation residues	K016	K018	S01	<input checked="" type="checkbox"/> On-site <input type="checkbox"/> Off-site	30	1 <input type="checkbox"/> lbs/gal <input type="checkbox"/> sg
		K019	K020		<input type="checkbox"/> On-site <input type="checkbox"/> Off-site		<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg
		K030			<input type="checkbox"/> On-site <input type="checkbox"/> Off-site		<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg
					<input type="checkbox"/> On-site <input type="checkbox"/> Off-site		<input type="checkbox"/> lbs/gal <input type="checkbox"/> sg
XIV.	COMMENTS: Line 5 – Chlorinated distillation residues in storage on December 31, 2018.						

EXAMPLE

(Make copies of this sheet for additional pages)

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PART THREE		TOTAL WASTE IN STORAGE ON DECEMBER 31, 2018							
XV.	<input type="checkbox"/>	NO - No Waste was in storage on December 31, 2018 Check this box if NO hazardous waste was in storage at your facility on December 31, 2018.							
	<input checked="" type="checkbox"/>	YES - Waste was in storage on December 31, 2018 Check this box if hazardous waste was in storage at your facility on December 31, 2018, then fill out Section XVI.							
XVI.	A		B		C		D	E	F
Line #	Description of Waste		EPA Hazardous Waste Codes		On-Site Storage Process Code		Amount of Waste	Unit of Measure	Year Waste Placed in Storage
1	Dissolved air flotation float, Crude oil storage tank sediment		K048	K169	S	02	100	2	2016
2	Ignitable spent solvent		D001		S	01	110	5	2018
3	Chlorinated distillation residues		K016	K018	S	01	30	1	2018
			K019	K020					
			K030		S				
					S				
					S				
					S				
					S				
					S				
XVII.	COMMENTS:								